

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Chest (2)		08-31-01
O.I.P.E. CLASSIFIER	ma		9/10/01
FORMALITY REVIEW	JH	1027	10/03/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
1	11/4/9
2	11/20
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7	11/20
8	11/20
9	N/N
10	N/N
11	N/N
12	N/N
13	11/20
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22	N/N
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26	N/N
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30	11/20
31	11/20
32	N/N
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49	11/20
50	11/20

Claim	Date
1	11/20
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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